

Message Text

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44

ACTION PM-07

INFO OCT-01 ARA-16 ISO-00 SS-20 CPR-02 A-01 MED-03 CIAE-00

INR-10 NSAE-00 RSC-01 DRC-01 SSO-00 /062 W

----- 123623

P 131753Z DEC 73

FM AMEMBASSY SANTIAGO

TO SECSTATE WASHDC PRIORITY 6861

DA WASHDC PRIORITY

INFO DOD WASHDC

UNCLAS SANTIAGO 6105

E.O.11652:N/A

TAGS: CI US PFOR MILI

SUBJ:MEDICAL TREATMENT FOR DAUGHTER OF CHILEAN ARMY MAJOR

1. GEN AUGUSTO PINOCHET UGARTE, CINC CHILEAN ARMY AND PRE-SIDENT OF GOVERNMENT JUNTA HAS REQUESTED MY HELP IN OBTAINING IMMEDIATE MEDICAL TREATMENT AT WALTER REED ARMY GENERAL HOSPITAL FOR A NINE YEAR OLD DAUGHTER OF AN ARMY MAJOR. THIS YOUNGSTER, DAUGHTER OF MAJOR MARIO DIAZ P, IS SUFFERING FROM CHRONIC RENAL FAILURE REQUIRING AN IMMEDIATE RENAL TRANSPLANT. THE CHILD'S MOTHER WHO IS THE SAME ABO AND RH GROUP IS WILLING TO BE THE DONOR. THE FOLLOWING INFORMATION IS PROVIDED FROM REPORT OF DR. FEDERICO PUGA C. CHIEF OF NEPHROLOGY AT LUIS CALVO MACKENNA HOSPITAL.

2. "VIVIANA DIAZ BALOCCHI, NINE YEARS OLD GIRLD HAD HER FIRST URINARY INFECTION WHEN SHE WAS TWO YEARS OLD, TREATED WITH APPARENT GOOD RESULT, BUT PERSISTED WITH A MARKED POLYURIA AND POLIDYPSIA. AT SIX YEARS OF AGE (1971) SHE HAD A "UREMIC COMA" AND HYPOTENSION IN PUERTO NATALES; RECOVERED WITH PARENTERAL FLUIDS AND THEN TRANSFERRED TO MILITARY HOSPITAL IN SANTIAGO AND LEF UNDER CONTROL OF A PRIVATE DOCTOR.

UREMIA 1 GR PERCENT

BLOOD PRESSURE 140/120

PYELOGRAM NEGATIVE (NO CONTRAST)

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URETROCYSTOGRAM: BYLATERAL SWFLUX WITH GREAT DEFOR-

MITIES ON PELVIS AND COLYS.
METABOLIC ACIDOSIS.

"SHE PERSISTED MORE OR LESS WELL FOR TWO YEARS RECEIVING 2 GRS
OF BICARBONATE AND 1 GR/KG PROTEIN IN THE DIET.

DIAGNOSIS:

CHRONIC RENAL FAILURE
CHRONIC PYELONEPHRITIS
BYLATERAL REFLUX
HIPERTENSION

" NEW ADMISION 26TH NOVEMBER 1973, AFTER TWO DAYS OF INTENSIVE
PRECORDIAL PAIN, PALLOR, DEEP BREATH, COUGH, B.P. 140/120,URE-
MIA 4 GRS PERCENT, PERICARDIAL RALES AND AN INCREASED CARDIAC AREA
WITH OVERLOAD OF LEFT VENTRICLE ON E.C.G. CO2 7.2 WITH NORMAL
ELECTROLYTES.

" TREATMENT CONSISTED OF BED REST, BICARBONATE AND HYPOPROTEIN DIET
WITH WHICH THE PAIN DISAPPEARED. GUANETIDINE 30 MG DAY WAS ADDED.
"IN OUTPATIENT CLINIC B.P. WAS 100/80 SO THAT THE GUANETIDINE WAS
REDUCED TO 10 MGS DAY. SHE STARTED COMPLAINING OF BONE PAIN AND
A RECHECK IS PROPOSED FOR 6 DECEMBER 1973.

" WITH HER ACTUAL STATE NO OTHER TREATMENT CAN BE OFFERED BUT A
RENAL TRANSPLANT. FORTUNATELY HER MOTHER HAS THE SAME ABO AND RH
GROUP AS VIVIANA AND SHE IS WILLING TO BE THE DONOR.

" THE CHILEAN EXPERIENCE ON TRANSPLANT IS NOT ACTUALLY SATIS-
FACTORY AND I HAVE SUGGESTED THAT OPERATION BE PERFORMED IN
THE U.S.A. WHERE THEY SHOULD TRAVEL AS SOON AS POSSIBLE. SIGNED
DR. FEDERICO PUGA C. CHIEF OF NEPHROLOGY, LUIS CALVO MACKENNA
HOSPITAL."

3. GEN PINOCHET IN HIS LETTER HAS ASSURED ME THAT THE ARMY OF
CHILE WILL BE RESPONSIBLE FOR ALL EXPENSES INCURRED DURING THIS
MEDICAL ATTENTION. HE FURTHER STATES THAT THE CHILEAN MILITARY
MISSION IN WASHDC HAS BEEN INSTRUCTED TO MAKE INQUIRIES ON
THIS MATTER. I RECOMMEND ACCEPTANCE OF THIS DESERVING CASE AS
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REASONABLE AND JUSTIFIABLE, AND IN THE INTERESTS OF OUR GOOD
RELATIONS WITH THE CHILEAN ARMY AND THE JUNTA. ARMA CONCURS.

THOMPSON

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Message Attributes

Automatic Decaptioning: X
Capture Date: 01 JAN 1994
Channel Indicators: n/a
Current Classification: UNCLASSIFIED
Concepts: MEDICAL CARE, SURGERY
Control Number: n/a
Copy: SINGLE
Draft Date: 13 DEC 1973
Decaption Date: 01 JAN 1960
Decaption Note:
Disposition Action: n/a
Disposition Approved on Date:
Disposition Authority: n/a
Disposition Case Number: n/a
Disposition Comment:
Disposition Date: 01 JAN 1960
Disposition Event:
Disposition History: n/a
Disposition Reason:
Disposition Remarks:
Document Number: 1973SANTIA06105
Document Source: CORE
Document Unique ID: 00
Drafter: n/a
Enclosure: n/a
Executive Order: N/A
Errors: N/A
Film Number: n/a
From: SANTIAGO
Handling Restrictions: n/a
Image Path:
ISecure: 1
Legacy Key: link1973/newtext/t19731226/aaaaatgm.tel
Line Count: 111
Locator: TEXT ON-LINE
Office: ACTION PM
Original Classification: UNCLASSIFIED
Original Handling Restrictions: n/a
Original Previous Classification: n/a
Original Previous Handling Restrictions: n/a
Page Count: 3
Previous Channel Indicators:
Previous Classification: n/a
Previous Handling Restrictions: n/a
Reference: n/a
Review Action: RELEASED, APPROVED
Review Authority: kellerpr
Review Comment: n/a
Review Content Flags:
Review Date: 14 NOV 2001
Review Event:
Review Exemptions: n/a
Review History: RELEASED <14-Nov-2001 by williad>; APPROVED <21 FEB 2002 by kellerpr>
Review Markings:

Declassified/Released
US Department of State
EO Systematic Review
30 JUN 2005

Review Media Identifier:
Review Referrals: n/a
Review Release Date: n/a
Review Release Event: n/a
Review Transfer Date:
Review Withdrawn Fields: n/a
Secure: OPEN
Status: NATIVE
Subject: EDICAL TREATMENT FOR DAUGHTER OF CHILEAN ARMY MAJOR
TAGS: PFOR, MILI, CI, US, WALTER REED ARMY GENERAL HOSPITAL, (DIAZ BALOCCHI, VIVIANA)
To: STATE
Type: TE
Markings: Declassified/Released US Department of State EO Systematic Review 30 JUN 2005